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Winter 2005

WELCOME TO "MASS CONNECTIONS"

The Massachusetts Department of Public Health would like to welcome you to our first edition of "Mass Connections," formerly known as the Infectious Disease Response Newsletter. Mass Connections will be issued twice a year and will serve to keep Smallpox Response Team Members informed with regard to MDPH's Center for Emergency Preparedness activities. In the last edition of the Infectious Disease Response Newsletter, we ran a naming contest for this newsletter. The name "Mass Connections," entered by Carol Rauch, MD, PhD, FCAP, Baystate Medical Center, was the winning entry. A number of very creative entries made the decision difficult. Thank you to all of you who sent in entries. We hope this newsletter will be informative in regard to ongoing MDPH Center for Emergency Preparedness activities.

Sincerely, Alfred DeMaria, Jr., MD Chief Medical Officer, Assistant Commissioner, MDPH Director, Bureau of Communicable Disease Control, State Epidemiologist

Suzanne Condon, MS Associate Commissioner Interim Director, Center for Emergency Preparedness

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Massachusetts Smallpox Program Update

The Massachusetts Department of Public Health continues to vaccinate and train Smallpox Response Team volunteers. As of the end of December 2005, 2,250 people have been trained in the administration of smallpox vaccine. We are currently developing a Smallpox Vaccine Administration Re-Certification Program for those people trained in vaccine administration prior to June 2004. This will be designed to maintain competence. We plan to have this on-line re-certification program available in the winter of 2006. The program will be credited for nursing contact hours and CME. It will also allow for participants to update their contact information in the Smallpox Response Team Database. For those participants who do not have Health and Homeland Alert Network (HHAN) accounts, they will be given the option of registering on the HHAN Alert Only System and set up their personal HHAN Account.

> Training in smallpox vaccine administration continues to be offered statewide. Target groups for trainings have been the local public health

nurses, school nurses, occupational health nurses, physicians, hospital staff and EMTs. Programs have been offered through the Massachusetts Pharmacist Association with certification of registered pharmacists in vaccine administration. Specialized nursing groups such as VNAs and parish nurses have been very interested in scheduling training and provide a unique community-based perspective to the smallpox preparedness effort. The Smallpox Vaccine Administration Program is being incorporated into the curriculum in some state college and university nursing programs, ensuring that new nurses are educated in disease identification and vaccination.

If you are interested in more information regarding our training programs or smallpox vaccination, please contact Mary Conant RN, BSN at 617-983-6862 or mary.conant@state.ma.us.

MDPH Center for Emergency Preparedness Created to Achieve Optimal Emergency Planning/Response

In the fall of 2003, the Massachusetts Department of Public Health (MDPH) established the Center for Emergency Preparedness (CEP). This center was created as an organizational enhancement within MDPH to assist in achieving optimal emergency planning/response between the state and local levels.

The CEP provides a coordinated response and single point of contact for all public health emergencies in Massachusetts. Planning and emergency response efforts related to bioterrorism, chemical, other infectious diseases, radiological emergencies, hospital preparedness and laboratory support are all coordinated through the CEP.

One of the most important accomplishments realized has been the establishment of 15 regional local health coalitions. Massachusetts has 351 local municipalities, each with its own board of health. Historically, it has been challenging to develop regional mechanisms to fund and support local public health efforts. The 15 regional coalitions were established in collaboration with local health officials statewide and have provided an important foundation for emergency planning efforts.

Smallpox Response Team Members to Join the HHAN

The Smallpox Response Team (SRT) will soon join the Massachusetts Health and Homeland Alert Network (HHAN). The HHAN provides the public health community with several functionalities. The HHAN can send semi-automated alerts containing critical information to any and all members. It provides a secure on-line repository of computer files, such as MS Word documents or Excel spreadsheets, with a suite of collaboration tools. The HHAN also serves as a directory, by function and role, of contact information for all its members. The HHAN is the tool that the Massachusetts Department of Public Health (MDPH, CEP) will use to mobilize the SRT.

When the SRT is needed, the MDPH will issue an alert. The HHAN will deliver this alert to the SRT members through email, text messaging, pagers, cell phones and landlines. Each individual user determines the best way or ways to be reached. The HHAN will track, in real-time, who has and who has not received the alert. This system will save critical hours during mobilization and deployment.

The HHAN relies on each user for its proper functioning. Each person is responsible for keeping contact information up to date. In a practical sense, this means entering your information correctly the first time on the system, and at the very least, logging back in to make changes as they occur. This is critical to the alerting and directory

functionalities. It also means that regular drills are required to ensure that the system works. Fortunately, the HHAN will prompt you to update your information periodically when you log in.

HHAN training for the SRT is web-based. You will also be able to complete the training from anywhere that you have access to the Internet. You will be able to return to the course as often as you like so you won't have to worry about losing your skills. When the course is ready, we will let you know. The HHAN team will be standing by to assist.

Soon after the rollout of the SRT HHAN, mobilization drills will begin. These drills will test the communications chain in both directions, and we need you to help us perfect the system.

Any questions regarding the Health and Homeland Alert Network can be sent to Scott Kenfield, the HHAN Training Coordinator. He can be reached at 617-983-6875 or scott.kenfield@state.ma.us.



Bioterrorism Preparedness Modular Trainings

The Center for Emergency Preparedness has put together a series of trainings focused on bioterrorism preparedness. The trainings were designed to promote local preparedness and assist communities in meeting requirements of federal funding. All of these trainings are being offered free to local public health. The trainings are CEU approved, as well as CME accredited, and the Smallpox Vaccine Administration training is approved for EMTs and paramedic educational credit, as well. The trainings vary in length and can be offered singularly or grouped together. The training programs are as follows:

- 1 Overview of Mass Dispensing Site Planning
- 2 Mass Dispensing Site: Smallpox Specific
- 3 Overview of Category A BT Agents
- 4 Rash Surveillance
- 6 Health and Homeland Alert Network (HHAN) Training
- 6 Behavioral Health Responses to Disaster
- Pandemic Influenza

If you are interested in obtaining more information about these programs, or would like to schedule one, please contact Mary Conant, Infectious Disease Response Nurse/Smallpox Coordinator, by phone at 617-983-6862, 978-851-7261 ext. 4037, or via email at mary.conant@state.ma.us.

These courses are also listed on the TrainingFinder Real-time Affiliate Integrated Network (TRAIN), at www.train.org. TRAIN is a premier learning resource for public health professionals. The service is free and will allow you to choose between a wide variety of public health related courses and will keep track of your attendance, completion and accumulated credits. As additional preparedness trainings are developed, they will be made available through the TRAIN system.

School Emergency Response Training Update

Response to bioterrorism and other emergencies requires a community-wide team approach for the safety and security of the community. Emergencies may vary from violence in the school, to situations such as hepatitis A in a food handler, to an influenza pandemic, to a smallpox outbreak. Many local/regional health coalitions are choosing schools as dispensing sites should mass vaccination and/or antibiotic distribution become necessary. They fit the criteria of large space for clinics that are handicap accessible, are well-known by the community, and have sanitary facilities, refrigeration and parking. School personnel understand the needs of their community and school nurses may be the first to identify spread of an infectious agent in the school setting. It is important for school staff volunteers to be at the table with their local boards of health, public health nurses, safety and fire officials, etc., in creating an effective emergency response plan for emergency dispensing sites (EDS). Team members need to meet and collaborate with their community partners by sharing expertise and understanding of defined roles prior to an emergency event rather than during a time of crisis.

The MDPH would like to have the majority of school nurses and public health nurses certified in smallpox vaccine administration. The Infectious Disease Response Nurse for the schools, Barbara Mackey, was hired in September 2004 to provide training to school nurses. As of December 2005, a total of 485 school nurses have attended educational programs providing an overview of dispensing sites and smallpox vaccine administration. Four hundred and sixteen nurses have been certified to administer the smallpox vaccine. Mapping shows that 131 of the 351 cities and towns have at least one school nurse certified to administer the smallpox vaccine.

If you are interested in attending a scheduled training in your area or would like to schedule training, please contact Barbara C. Mackey, APRN, School Infectious Disease Response Nurse at 617-624-5487 or via email at barbara.mackey@state.ma.us.

Smallpox Re-Certification Program

The Massachusetts Department of Public Health (MDPH) is developing a Smallpox Vaccine Administration Re-Certification program for those response team members trained in vaccine administration prior to June 2004. The program is being designed to ensure competence in the areas of vaccine administration, vaccine storage and handling, contraindications, take evaluation, and management of adverse events. The MDPH hopes to have this winter program completed and on-line in the winter of 2006. The program will award CEUs and CMEs to participants who successfully complete the program. Once the program is available, you will receive notification and instructions about how to access it via the Internet. Along with renewing competence, participants will be asked to update their demographic information for our Response Team database. You will also be given the opportunity to request a Health and Homeland Alert Network (HHAN) Alert Only Account, so as to be able to receive HHAN Alert messages regarding public health advisories or emergencies.

Personal Protective Equipment for Infection Control in the Community Setting

MDPH has piloted a program this summer concerning the use of personal protective equipment (PPE) in the community setting. Participants in this pilot included medical and non-medical professionals and staff of local boards of health. Feedback from these participants will be utilized to produce a program that will be presented statewide. Upon completion of the upcoming program, participants should be able to:

- 1 Explain the importance of following infection control practices in their day-to-day work.
- 2 Demonstrate how to select and use personal protective equipment in a community setting.
- 3 Describe proper techniques for standard precautions, expanded precautions, hand hygiene and respiratory hygiene.



What are Community-Based Emergency Dispensing Sites?

Community-based Emergency Dispensing Sites (EDS) are designed to administer vaccines or medications to a large number of people in a short period of time and were created as a result of the Center for Emergency Preparedness, Strategic National Stockpile (SNS) Program Planning. They may be a necessary part of the response to infectious disease outbreaks of various sizes, ranging from a single case of hepatitis A in a food handler to cases of meningitis in a high school, to an influenza pandemic or bioterrorist (BT) event involving thousands. In a declared emergency, Massachusetts Department of Public Health (MDPH), working with the Massachusetts Emergency Management Agency (MEMA), will assess and respond to identified local needs for medication.

The objectives for the EDS are: to be able to meet the needs of the community in a worst-case scenario (which may require the ability to establish a site within 24 hours of notification); to provide initial treatment for 80% of the population within 48 hours; and to provide treatment for the remaining 20% over the next 72 hours. For cities that fall under the City Readiness Initiative (CRI), the expectation is that 100% of their population would receive treatment within 48 hours. This is a large-scale operation requiring multiple agencies and community members. Local EDS plans can be scaled down in response to smaller events.

Depending upon the severity of the event and the geographic distribution of population, communities may choose to establish one or more EDS. Although every community must have an EDS plan to provide mass prophylaxis or vaccination, several communities may decide to collaborate, working together to share resources, enhance efficiency, and create one unified plan.

Communities are encouraged to create planning committees that are representative of all stakeholders. This may include government, schools, public safety, public health, business, special populations, and other healthcare entities within the community. The "Emergency Dispensing Sites (EDS) Management and Operations" guidance is available on the MDPH website: www.mass.gov/dph/bioterrorism/advisorygrps/index.htm.

The Center for Emergency Preparedness and Regional Coordinators are working directly with local regional coalitions to develop plans utilizing the detailed information in the EDS document.

Where is My Community/Agency in its Planning?

Many of you know that community-based Emergency Dispensing Sites (EDS) are designed to administer vaccines or medications to a large number of people in a short period of time. But, did you know that every community in the Commonwealth needed to have a plan by June 30, 2005? Planning for these sites is a complicated task involving many disciplines. As a professional with specialized training (smallpox administration), it is up to you to determine what your role might be. Has your place of employment put together a plan that includes you? Are you available to your community? Do you know others who might help? If so, please let your local board of health know of your availability. Local boards of health are seeking hundreds of volunteers to assist in many areas from parking cars to supplying food and water to the staff to assessing those who present to the EDS and providing prophylaxis.

We all can hope that a large scale response is never needed; however, these sites may be a necessary part of the response to infectious disease outbreaks of various sizes. Your help would be needed. Please consider volunteering.

Questions to consider in the planning process for your community:

- Who can help?
- Who might we consider delivering medication to (versus asking them to attend)?
- What does the flow through of the site look like?
- What are our diverse populations?
- How can we reach out to these populations?

We encourage you to share your expertise by becoming involved whenever possible.



SPECIAL POPULATIONS

The Center for Emergency Preparedness has established an internal 'Special Populations' workgroup to ensure the inclusion of populations with special needs into MDPH's emergency preparedness planning. The workgroup, which includes representation from MDPH's Office of Multicultural Health, Division of Special Health Care Needs, Bureau of Communicable Disease Control, Refugee and Immigrant Health Program, Bureau of Substance Abuse Services, and EMS for Children, has developed a definition of 'special populations'.

The definition was created to facilitate discussion with special populations considered by two major groupings:

Demographic Group

Demographically diverse individuals (e.g., race, ethnicity, culture, languages, elders, children, refugees, immigrants, and language proficiency, etc.)

Conditions Group

Individuals with physical or cognitive disabilities (e.g., deaf/hard of hearing, visually impaired, confined to a wheelchair, mental health/substance abuse conditions, etc.)

Some of the larger projects the workgroup has initiated include:

Focus Groups – In order to assist families whose children have special health needs to proactively plan for possible emergencies within their communities, MDPH convened focus groups in each MDPH Emergency Preparedness region. MDPH is proposing to do the same next year.

Directions Manual – "Directions: Resources for Your Child's Care," a guide protocol by MDPH, includes a section on emergency preparedness and is available on MDPH's website (www.mass.gov/dph/fch/directions). Hard-copy/CD-ROM formats

are available and copies have been sent to each pediatrician's office in Massachusetts. The guide will be available in Spanish and Portuguese.

Special Populations Risk
Communication Course – This course
has been developed for individuals/
organizations (or 'intermediaries')
who provide either direct services
or information to special population
groups in Massachusetts.

The goals of this course are to:

- Enhance the skills of special population intermediaries in the areas of risk communication and emergency preparedness.
- Bring these intermediaries together with local public health and emergency management officials.

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9-1-1 Disability Indicator Program **Promotion** – MDPH is working with the Statewide Emergency Telecommunications Board (SETB) to promote a program allowing individuals with special health needs to register for a program that will allow 9-1-1 dispatchers to have an indication of the specific medical needs (e.g., confined to a wheelchair) of an individual when they make a 9-1-1 call from their home telephone. The 9-1-1 dispatcher can then alert the emergency responders to the specific medical need prior to their arrival at the individual's home. For more information, please visit: www.mass.gov/e911/muni.htm

Guide for Local Boards of

Health – MDPH developed this guide
(www.mass.gov/dph/bioterrorism/
advisorygrps/pdfs/spop_guidance_
5_05.pdf) to assist local boards of health
in developing emergency preparedness
plans for special populations.

The guide intends to:

- Define 'special populations;'
- Help local health agents and regional coalitions in identifying their community-specific special populations;
- Provide a list of relevant resources at MDPH; and
- Help develop emergency response measures for special populations.

For more information about these activities and MDPH's other emergency preparedness initiatives focusing on populations with special needs, please contact: Jeff Timperi, MPA, Behavioral Health and Special Populations liaison, Center for Emergency Preparedness, Massachusetts Department of Public Health via email at Jeffrey. Timperi@ state.ma.us or by phone at 617-624-5275.



Medical Reserve Corps

The Medical Reserve Corps (MRC) Program coordinates the application of the skills of practicing and retired physicians, nurses and other health professionals, as well as other volunteers. Many professionals are eager to volunteer to assist in their community's ongoing public health needs and to help during large-scale emergency situations.

Local community leaders develop their own Medical Reserve Corps units and identify the duties of the MRC volunteers according to specific community needs. For example, MRC volunteers may deliver necessary services during a crisis, assist emergency response teams with patients, and provide care directly to those with less serious injuries and other health-related issues.

MRC volunteers may also serve a vital role by assisting their communities with ongoing public health needs (e.g., immunization, screening, health and nutrition education, and volunteering in community health centers and local hospitals). Once established, how the local MRC unit is utilized is decided locally. The MRC unit will decide in collaboration with local officials, including the local Citizen Corps Council, about when the community MRC is activated during a local emergency.

There are 11 MRC units active in Massachusetts. To find the closest unit visit: www.medicalreservecorps.gov/index.cfm?MRCaction=MRCunit. Contact#Massachusetts.

Community Emergency Response Corps

The Community Emergency Response Team (CERT) program helps train people to be better prepared to respond to emergency situations in their communities. When emergencies happen, CERT members can give critical support to first responders, provide immediate assistance to victims, and organize spontaneous volunteers at a disaster site. CERT members can also help with non-emergency projects that help improve the safety of the community.

The CERT course is taught in the community by a trained team of first responders who have completed a CERT train-the-trainer course, conducted by their state training office for emergency management, or FEMA's Emergency Management Institute (EMI), located in Emmitsburg, Maryland. CERT training includes disaster preparedness, disaster fire suppression, basic disaster medical operations, light search and rescue operations.

Massachusetts currently has 104 CERT programs. To find out where the closest CERT is to you, visit: www.training.fema.gov/emiweb/CERT/c ma.htm.

MRC Members Offer Volunteer Surge Capacity

The events of Sept. 11, 2001, showed that the nation would benefit from having groups of medical volunteers, trained and identified in advance, to offer surge capacity in case of disasters. As a federal preparedness initiative, the first three-year grants to establish Medical Reserve Corps (MRC) units were issued in July 2002. By now there are over 275 MRCs in 47 states, from Alaska to the U.S. Virgin Islands, comprised of more than 40,000 volunteers. See www.MedicalReserveCorps.gov to learn about the national program.

The Upper Merrimack Valley MRC (UMVMRC) is one of 11 federally funded units in Massachusetts, and is based out of the Westford Board of Health. It serves the communities of Billerica, Chelmsford, Dracut, Lowell, Tewksbury, Tyngsboro, and Westford. The UMVMRC has over 210 members and counting. Volunteers are being recruited and trained for three activities: public health emergencies, mass casualty incidents, and community service. Members were deployed for multiple reasons this year, including flu/health clinics, health fairs, and community health education forums.

To establish a well trained unit, UMVMRC members have been offered free training in Disaster Response through the American Red Cross and CPR classes. Additionally, Mary Conant, RN, MDPH provided members smallpox certification and mass dispensing site training. Members have also been encouraged to take ICS/NIMS courses. Future courses are being scheduled on various topics such as avian influenza, WMD and SARS. Free CEUs are offered.

The UMVMRC organizes quarterly meetings with other units in Massachusetts to network, share best practices and processes for utilizing volunteers, and to help standardize operating procedures. The unit continues to work with the national office and MDPH to address issues such as communication, credentialing, training and development of a statewide registry to assure members are not on multiple emergency response lists.

Recently, a recruitment video produced by the unit and scripted by our coordinator, won an international communication award (Dalton Pen). This video is available to other communities upon request. Materials such as the unit's brochure and recruitment letter are available as a template and can be adapted for your own unit.

To assure surge capacity in case of an event, it is important that the role of the MRC members is incorporated into your emergency response plan. The Massachusetts Health Officers Association Bioterrorism (MHOA-BT) template, as well as the Massachusetts Department of Public Health, CEP's Infectious Disease Emergency Plan (MDPH-IDEP), provide examples of ways to utilize a core group of trained emergency response personnel. Planning early can assure adequately trained staff.

Although additional federal funds have not been released, additional resources/funding may be available and units can continue to be formed and to register their unit with the national office. Formation of regional units rather than individual community efforts, is encouraged to improve response capabilities.

For more information on Medical Reserve Corps or this unit, see the web site, www.MerrimackValleyMRC .org, or contact the Director (Sandy Collins, 978-399-2908, scollins@westford.mec.edu) or Coordinator (Nancy Burns, 978-399-2549, nburns@westford.mec.edu).

Easthampton, Southampton and Westhampton Medical Reserve Corps

The Easthampton, Southampton and Westhampton Medical Reserve Corps (MRC) consists of a group of volunteers, many of whom have medical backgrounds. Our MRC unit is funded by a grant from the federal Department of Health and Human Services. The Easthampton Board of Health oversees the grant. The MRC mission is to serve citizens and communities throughout the United States by establishing local teams of volunteers to strengthen the public health infrastructure and improve emergency preparedness.

Keeping this mission in mind, our Advisory Board, which helps guide the direction of our MRC, decided to focus on three initial priorities:

- 1 To develop our MRC unit;
- 2 To identify and certify Red Cross shelters in our communities; and
- 3 To refine our Community Emergency Response Plan to include a public health component.

Our MRC is working on accomplishing these three goals. Several shelters have been identified

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and certified, and we have worked on plans for public health response to emergencies.

We have planned projects and conducted trainings that support our goals. Our volunteers attended a Red Cross course certifying them to staff emergency shelters. This training will be enhanced by visiting one or more of the identified shelters to better acquaint the volunteers with the layout and particulars of opening and running a shelter.

In November 2004, many of our MRC volunteers participated in our Emergency Dispensing Exercise in Northampton. They not only staffed the clinic, but also were instrumental in the planning and evaluation of the exercise. This past Spring, we were selected to present our experience

using the MRC during the functional exercise at the Annual National MRC Leadership Conference. This allowed members the opportunity to meet Surgeon General Richard Carmona, Robert Tosatto, Director of the MRC Program, and MRC leaders from across the country. It was a motivational and informative experience.

With a flu pandemic a real threat, our MRC is interested in flu pandemic planning. The volunteers will assist in evaluating our emergency dispensing sites (EDS), and help staff our community flu vaccine clinics. Along with this project, we will schedule a program on avian flu and pandemic planning.

Our unit continues to plan ways to improve the health of our communities. Working with the schools on health initiatives has been a topic of discussion. Members have enjoyed getting to know and work with a wide variety of volunteer colleagues who contribute their skills and expertise to their communities.

For more information on this unit, contact: Patricia Abbott, RN Public Health Nurse/MRC Coordinator via email at phnurse@northampton.ma.us or by phone at 413-529-1496.



Massachusetts Department of Public Health

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